

**STATEMENT OF SOCIAL-SECURITY NUMBER OR
INDIVIDUAL TAXPAYER-IDENTIFICATION NUMBER (ITIN)**

**UNITED STATES BANKRUPTCY COURT
Northern District of Illinois**

STATEMENT OF SOCIAL-SECURITY NUMBER(S)
(or other Individual Taxpayer-Identification Number(s) (ITIN(s)))

1. Name of Debtor (Last, First, Middle): **De Grush, Valerie, K**

(Check the appropriate box and, if applicable, provide the required information.)

Debtor has a Social-Security Number and it is: 319 - 76 - 3234
(If more than one, state all.)

Debtor does not have a Social-Security Number but has an Individual Taxpayer-Identification Number (ITIN), and it is: _____.
(if more than one, state all.)

Debtor does not have either a Social-Security Number or an Individual Taxpayer-Identification Number (ITIN).

2. Name of Joint Debtor (Last, First, Middle):

(Check the appropriate box and, if applicable, provide the required information.)

Joint Debtor has a Social-Security Number and it is: _____ - _____ - _____
(If more than one, state all.)

Joint Debtor does not have a Social-Security Number but has an Individual Taxpayer-Identification Number (ITIN), and it is:_____.
(if more than one, state all.)

Joint Debtor does not have either a Social-Security Number or an Individual Taxpayer-Identification Number (ITIN)

I declare under penalty of perjury that the foregoing is true and correct.

x s/ Valerie K Baker

8/23/2008

Valerie K Baker

Valerie R. Baker
Signature of Debtor

Date

**Joint debtors must provide information for both spouses.*

Penalty for making a false statement: Fine of up to \$250,000 or up to 5 years imprisonment or both. 18 U.S.C. §§ 152 and 3571.